

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

**In the Matter of the Accusation
Against:**

BRYAN CHARLES DOONAN M.D.

File No. 8002015019101

**Physician's and Surgeon's
Certificate No. A78014**

Respondent

DECISION

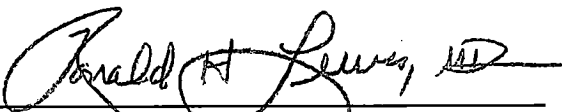
The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on October 12, 2018.

IT IS SO ORDERED September 14, 2018.

MEDICAL BOARD OF CALIFORNIA

By:



**Ronald H. Lewis, M.D., Chair
Panel A**

1 XAVIER BECERRA
Attorney General of California
2 JUDITH T. ALVARADO
Supervising Deputy Attorney General
3 TAN N. TRAN
Deputy Attorney General
4 State Bar No. 197775
California Department of Justice
5 300 South Spring Street, Suite 1702
Los Angeles, CA 90013
6 Telephone: (213) 269-6535
Facsimile: (213) 897-9395
7 *Attorneys for Complainant*

8 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
9 **DEPARTMENT OF CONSUMER AFFAIRS**
10 **STATE OF CALIFORNIA**

11 In the Matter of the First Amended Accusation
12 Against:

13 **BRYAN CHARLES DOONAN, M.D.**
14 **360 San Miguel Drive, Suite 107**
Newport Beach, CA 92660

15 **Physician's and Surgeon's Certificate**
No. A 78014,

16 *Respondent.*

Case No. 800-2015-019101

OAH No.: 2017101195

STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER

17 **IT IS HEREBY STIPULATED AND AGREED** by and between the parties to the above-
18 entitled proceedings that the following matters are true:

19 **PARTIES**

20 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board
21 of California. She brought this action solely in her official capacity and is represented in this
22 matter by Xavier Becerra, Attorney General of the State of California, by Tan N. Tran, Deputy
23 Attorney General.

24 2. Respondent Bryan Charles Doonan, M.D. (Respondent) is represented in this
25 proceeding by attorney Gary Wittenberg, whose address is: 1901 Avenue of the Stars, Suite
26 1750, Los Angeles, CA 90067.

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3. On or about February 22, 2002, the Medical Board of California issued Physician's and Surgeon's Certificate No. A 78014 to Bryan Charles Doonan, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in First Amended Accusation No. 800-2015-019101 and will expire on November 30, 2019, unless renewed.

JURISDICTION

4. First Amended Accousation No. 800-2015-019101 was filed before the Medical Board of California (Board), Department of Consumer Affairs, and is currently pending against Respondent. The Accousation and all other statutorily required documents were properly served on Respondent on July 20, 2017. Respondent timely filed his Notice of Defense contesting the First Amended Accousation.

5. A copy of First Amended Accusation No. 800-2015-019101 is attached as exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in First Amended Accusation No. 800-2015-019101. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

7. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the First Amended Accusation; the right to be represented by counsel at his own expense; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

III

1 14. In consideration of the foregoing admissions and stipulations, the parties agree that
2 the Board may, without further notice or formal proceeding, issue and enter the following
3 Disciplinary Order:

4 **DISCIPLINARY ORDER**

5 A. **PUBLIC REPRIMAND**

6 IT IS HEREBY ORDERED that Respondent Bryan Charles Doonan, M.D., Physician's and
7 Surgeon's Certificate No. A 78014, shall be and is hereby Publicly Reprimanded, with terms and
8 conditions below, pursuant to California Business and Professions Code section 2227,
9 subdivision (a)(4). This Public Reprimand, is issued in connection with Respondent's violations
10 of the Medical Practice Act, as set forth in First Amended Accusation No. 800-2015-019101, is as
11 follows:

12 In or about 2012 through 2016, Dr. Doonan failed to adequately monitor the serum
13 testosterone levels of a patient for whom he was prescribing testosterone therapy.

14 B. **EDUCATION COURSE.** Within 60 calendar days of the effective date of this
15 Decision, Respondent shall submit to the Board or its designee for its prior approval educational
16 program(s) or course(s) which shall not be less than 40 hours. The educational program(s) or
17 course(s) shall be aimed at correcting any areas of deficient practice or knowledge and shall be
18 Category I certified. The educational program(s) or course(s) shall be at Respondent's expense
19 and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of
20 licensure. Following the completion of each course, the Board or its designee may administer an
21 examination to test Respondent's knowledge of the course.

22 Failure to attend and complete the course work shall constitute general unprofessional
23 conduct and shall be grounds for further disciplinary action.

24 C. **PRESCRIBING PRACTICES COURSE.** Within 60 calendar days of the
25 effective date of this Decision, Respondent shall enroll in a course in prescribing practices
26 approved in advance by the Board or its designee. Respondent shall provide the approved course
27 provider with any information and documents that the approved course provider may deem
28 pertinent. Respondent shall participate in and successfully complete the classroom component of

1 the course not later than six (6) months after Respondent's initial enrollment. Respondent shall
2 successfully complete any other component of the course within one (1) year of enrollment. The
3 prescribing practices course shall be at Respondent's expense and shall be in addition to the
4 Continuing Medical Education (CME) requirements for renewal of licensure.

5 A prescribing practices course taken after the acts that gave rise to the charges in the
6 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
7 or its designee, be accepted towards the fulfillment of this condition if the course would have
8 been approved by the Board or its designee had the course been taken after the effective date of
9 this Decision.

10 Respondent shall submit a certification of successful completion to the Board or its
11 designee not later than 15 calendar days after successfully completing the course, or not later than
12 15 calendar days after the effective date of the Decision, whichever is later.

13 Failure to attend and complete the prescribing practices course shall constitute general
14 unprofessional conduct and shall be grounds for further disciplinary action.

15 **D. MEDICAL RECORD KEEPING COURSE.** Within 60 calendar days of the
16 effective date of this Decision, Respondent shall enroll in a course in medical record keeping
17 approved in advance by the Board or its designee. Respondent shall provide the approved course
18 provider with any information and documents that the approved course provider may deem
19 pertinent. Respondent shall participate in and successfully complete the classroom component of
20 the course not later than six (6) months after Respondent's initial enrollment. Respondent shall
21 successfully complete any other component of the course within one (1) year of enrollment. The
22 medical record keeping course shall be at Respondent's expense and shall be in addition to the
23 Continuing Medical Education (CME) requirements for renewal of licensure.

24 A medical record keeping course taken after the acts that gave rise to the charges in the
25 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
26 or its designee, be accepted towards the fulfillment of this condition if the course would have
27 been approved by the Board or its designee had the course been taken after the effective date of
28 this Decision.

1 Respondent shall submit a certification of successful completion to the Board or its
2 designee not later than 15 calendar days after successfully completing the course, or not later than
3 15 calendar days after the effective date of the Decision, whichever is later.

4 Failure to attend and complete the medical record keeping course shall constitute general
5 unprofessional conduct and shall be grounds for further disciplinary action.

6 E. **PROFESSIONALISM PROGRAM (ETHICS COURSE).** Within 60
7 calendar days of the effective date of this Decision, Respondent shall enroll in a professionalism
8 program, that meets the requirements of Title 16, California Code of Regulations (CCR) section
9 1358.1. Respondent shall participate in and successfully complete that program. Respondent
10 shall provide any information and documents that the program may deem pertinent. Respondent
11 shall successfully complete the classroom component of the program not later than six (6) months
12 after Respondent's initial enrollment, and the longitudinal component of the program not later
13 than the time specified by the program, but no later than one (1) year after attending the
14 classroom component. The professionalism program shall be at Respondent's expense and shall
15 be in addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

16 A professionalism program taken after the acts that gave rise to the charges in the
17 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
18 or its designee, be accepted towards the fulfillment of this condition if the program would have
19 been approved by the Board or its designee had the program been taken after the effective date of
20 this Decision.

21 Respondent shall submit a certification of successful completion to the Board or its
22 designee not later than 15 calendar days after successfully completing the program or not later
23 than 15 calendar days after the effective date of the Decision, whichever is later.

24 Failure to attend and complete the professionalism program shall constitute general
25 unprofessional conduct and shall be grounds for further disciplinary action.

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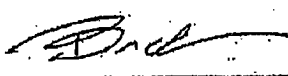
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ACCEPTANCE

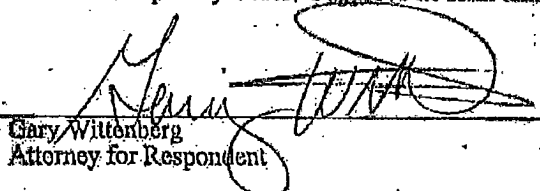
I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully discussed it with my attorney, Gary Wittenberg. I understand the stipulation and the effect it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the Medical Board of California.

DATED: 8/17/18

 M.D.
Bryan Charles Doonan, M.D.
Respondent

I have read and fully discussed with Respondent the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

DATED: 8/20/18


Gary Wittenberg
Attorney for Respondent

ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California of the Department of Consumer Affairs.

Dated: 8/21/18

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
JUDITH T. ALVARADO
Supervising Deputy Attorney General



TAN N. TRAN
Deputy Attorney General
Attorneys for Complainant

Exhibit A

First Amended Accusation No. 800-2015-019101

1 XAVIER BECERRA
Attorney General of California
2 JUDITH T. ALVARADO
Supervising Deputy Attorney General
3 TAN N. TRAN
Deputy Attorney General
4 State Bar No. 197775
California Department of Justice
5 300 So. Spring Street, Suite 1702
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6 Telephone: (213) 269-6535
Facsimile: (213) 897-9395
7 Attorneys for Complainant

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO May 10 20 18
BY RLH ANALYST

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BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

11 In the Matter of the First Amended Accusation
Against:

Case No. 800-2015-019101

12 Bryan Charles Doonan, M.D.
13 360 San Miguel Drive, Suite 107
14 Newport Beach, CA 92660

FIRST AMENDED ACCUSATION

15 Physician's and Surgeon's Certificate
No. A 78014,

16 Respondent.

17
18 Complainant alleges:

19
20 PARTIES

21 1. Kimberly Kirchmeyer (Complainant) brings this First Amended Accusation solely in
22 her official capacity as the Executive Director of the Medical Board of California, Department of
23 Consumer Affairs (Board).

24 2. On or about February 22, 2002, the Medical Board issued Physician's and Surgeon's
25 Certificate Number A 78014 to Bryan Charles Doonan, M.D. (Respondent). The Physician's and
26 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought
27 herein and will expire on November 30, 2019, unless renewed.

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1 "(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the
2 violation of, or conspiring to violate any provision of this chapter.

3 "(b) Gross negligence.

4 "(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or
5 omissions. An initial negligent act or omission followed by a separate and distinct departure from
6 the applicable standard of care shall constitute repeated negligent acts.

7 "(1) An initial negligent diagnosis followed by an act or omission medically appropriate
8 for that negligent diagnosis of the patient shall constitute a single negligent act.

9 "(2) When the standard of care requires a change in the diagnosis, act, or omission that
10 constitutes the negligent act described in paragraph (1), including, but not limited to, a
11 reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs from the
12 applicable standard of care, each departure constitutes a separate and distinct breach of the
13 standard of care.

14 "(d) Incompetence.

15 "(e) The commission of any act involving dishonesty or corruption which is substantially
16 related to the qualifications, functions, or duties of a physician and surgeon.

17 "(f) Any action or conduct which would have warranted the denial of a certificate.

18 "(g) The practice of medicine from this state into another state or country without meeting
19 the legal requirements of that state or country for the practice of medicine. Section 2314 shall not
20 apply to this subdivision. This subdivision shall become operative upon the implementation of
21 the proposed registration program described in Section 2052.5.

22 "(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and
23 participate in an interview scheduled by Board. This subdivision shall only apply to a certificate
24 holder who is the subject of an investigation by the board."

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1 7. Section 2242 of the Code states:

2 "(a) Prescribing, dispensing, or furnishing dangerous drugs as defined in Section 4022
3 without an appropriate prior examination and a medical indication, constitutes unprofessional
4 conduct.

5 "(b) No licensee shall be found to have committed unprofessional conduct within the
6 meaning of this section if, at the time the drugs were prescribed, dispensed, or furnished, any of
7 the following applies:

8 "(1) The licensee was a designated physician and surgeon or podiatrist serving in the
9 absence of the patient's physician and surgeon or podiatrist, as the case may be, and if the drugs
10 were prescribed, dispensed, or furnished only as necessary to maintain the patient until the return
11 of his or her practitioner, but in any case no longer than 72 hours.

12 "(2) The licensee transmitted the order for the drugs to a registered nurse or to a licensed
13 vocational nurse in an inpatient facility, and if both of the following conditions exist:

14 "(A) The practitioner had consulted with the registered nurse or licensed vocational nurse
15 who had reviewed the patient's records.

16 "(B) The practitioner was designated as the practitioner to serve in the absence of the
17 patient's physician and surgeon or podiatrist, as the case may be.

18 "(3) The licensee was a designated practitioner serving in the absence of the patient's
19 physician and surgeon or podiatrist, as the case may be, and was in possession of or had utilized
20 the patient's records and ordered the renewal of a medically indicated prescription for an amount
21 not exceeding the original prescription in strength or amount or for more than one refill.

22 "(4) The licensee was acting in accordance with Section 120582 of the Health and Safety
23 Code."

24 8. Section 2266 of the Code states: "The failure of a physician and surgeon to maintain
25 adequate and accurate records relating to the provision of services to their patients constitutes
26 unprofessional conduct."

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1 9. Section 725 of the Code states:

2 "(a) Repeated acts of clearly excessive prescribing, furnishing, dispensing, or administering
3 of drugs or treatment, repeated acts of clearly excessive use of diagnostic procedures, or repeated
4 acts of clearly excessive use of diagnostic or treatment facilities as determined by the standard of
5 the community of licensees is unprofessional conduct for a physician and surgeon, dentist,
6 podiatrist, psychologist, physical therapist, chiropractor, optometrist, speech-language
7 pathologist, or audiologist.

8 "(b) Any person who engages in repeated acts of clearly excessive prescribing or
9 administering of drugs or treatment is guilty of a misdemeanor and shall be punished by a fine of
10 not less than one hundred dollars (\$100) nor more than six hundred dollars (\$600), or by
11 imprisonment for a term of not less than 60 days nor more than 180 days, or by both that fine and
12 imprisonment.

13 "(c) A practitioner who has a medical basis for prescribing, furnishing, dispensing, or
14 administering dangerous drugs or prescription controlled substances shall not be subject to
15 disciplinary action or prosecution under this section.

16 "(d) No physician and surgeon shall be subject to disciplinary action pursuant to this section
17 for treating intractable pain in compliance with Section 2241.5."

18 FIRST CAUSE FOR DISCIPLINE

19 (Repeated Negligent Acts- 3 Patients)

20 10. Respondent is subject to disciplinary action under section 2234, subdivision (c), of
21 the Code in that he committed repeated negligent acts in his care and treatment of patients M.M.,
22 T.F., and D.P.¹ The circumstances are as follows:

23 Patient M.M.

24 11. Patient M.M. (or "patient") is a male who treated with Respondent from about 2011
25 to 2016.² Respondent treated the patient with prescriptions for Xanax 2 mg twice a day, Valium

26
27 ¹ The patients are identified by initial to protect their privacy.

28 ² These are only approximate dates, based on the records available for review.

1 10 mg in the evening, and Testosterone injections of 200 mg intramuscularly every two weeks.³

2 The patient's past medical history indicates a history of alcohol abuse, and his medical records
3 show a single blood testosterone level of 1422 ng/dl performed on October 1, 2012, as well as
4 prescriptions for simultaneous usage of Xanax and Valium, with continuing alcohol use.

5 12. Respondent prescribed testosterone to the patient without existing laboratory
6 evidence of the presence of low testosterone blood levels, and respondent did not routinely check
7 the blood testosterone levels for patients receiving testosterone injections.⁴

8 13. Respondent also prescribed Xanax and Valium at doses too high for a patient, who
9 had a history of alcohol abuse, and without any documentation that respondent had first inquired
10 about the patient's current alcohol use/abuse. Also, respondent did not have prior and current
11 medical records which indicated medical justification for prescribing controlled substances.⁵

12 These acts and omissions in the treatment of patient M.M. constituted a simple departure from the
13 standard of care.

14 Patient T.F.

15 14. Patient T.F. (or "patient") is a male who treated with Respondent from about 2012 to
16 2014.⁶ Respondent treated the patient for depression, anxiety, and low testosterone levels.

17 Respondent prescribed Androgel 1%, 4 pumps in the morning, Xanax, and Lexapro.

18 Respondent's medical records for this patient do not contain blood testosterone levels or an
19 evaluation of the patient's depression and anxiety. Respondent's nurse practitioner mentioned the
20 need to order blood PSA and testosterone levels, but these were not ordered.

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23 ³ These prescriptions are all dangerous drugs/controlled substances with potentially
24 addictive traits and side effects, if used improperly and/or overused.

25 ⁴ Respondent claimed that he had inherited patient M.M. from a previous physician who
26 diagnosed the patient with low testosterone. However, records to support this claim have not
27 been provided.

28 ⁵ Respondent did diagnose the patient with anxiety and insomnia on April 21, 2011.
Respondent did not again refer to the diagnosis of anxiety in his records and only once again to
insomnia, on September 22, 2016, although he continued to prescribe Xanax and Valium to the
patient.

⁶ Again, these are only approximate dates, based on the records available for review.

1 15. Respondent did not routinely check the blood testosterone levels for this patient, who
2 was receiving testosterone injections. Respondent also prescribed Xanax and Lexapro
3 (medications for anxiety) to T.F., without first performing a sufficient evaluation and history of
4 the patient indicating that said prescriptions for controlled substances were indicated/warranted.
5 These acts and omissions in the treatment of patient T.F. constituted a simple departure from the
6 standard of care.

7 Patient D.P.

8 16. Patient D.P. (or "patient") is a male who treated with Respondent from about 2013 to
9 2014⁷ for anxiety. Respondent's records showed prescriptions to the patient for Xanax, that the
10 patient had a history of alcohol abuse, that the patient suffered a seizure due to alcohol
11 withdrawal, and hospitalization for Xanax detoxification and a diagnosis of drug dependency.

12 17. Respondent's records for the patient do not indicate a sufficient reason for ongoing
13 Xanax usage, especially after the patient suffered a seizure on April 16, 2013 from alcohol, and
14 possibly Xanax. Also, respondent did not refer the patient to a substance abuse program until
15 April 27, 2014, more than a year after the seizure event, although records show that respondent
16 continued to prescribe Xanax to the patient after this date. These acts and omissions in the
17 treatment of patient D.P. constituted a simple departure from the standard of care.

18 SECOND CAUSE FOR DISCIPLINE

19 (Prescribing Without Exam/Indication)

20 18. By reason of the facts and allegations set forth in the First Cause for Discipline above,
21 Respondent is subject to disciplinary action under section 2242 of the Code, in that Respondent
22 prescribed dangerous drugs to patients M.M., T.F., and D.P. without an appropriate prior
23 examination or medical indication therefor.

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27 ⁷ Again, these are only approximate dates, based on the records available for review.
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1 THIRD CAUSE FOR DISCIPLINE

2 (Excessive Prescribing)

3 19. By reason of the facts and allegations set forth in the First Cause for Discipline above,
4 Respondent is subject to disciplinary action under section 725 of the Code, in that Respondent
5 excessively prescribed dangerous drugs to patients M.M., T.F., and D.P.

6 FOURTH CAUSE FOR DISCIPLINE

7 (Inadequate Records)

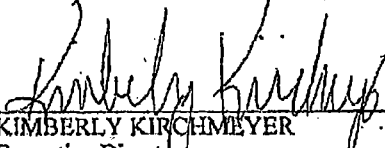
8 20. By reason of the facts and allegations set forth in the First Cause for Discipline above,
9 Respondent is subject to disciplinary action under section 2266 of the Code, in that Respondent
10 failed to maintain adequate and accurate records of his care and treatment of patients M.M., T.F.,
11 and D.P.

12 PRAYER

13 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
14 and that following the hearing, the Medical Board of California issue a decision:

- 15 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 78014,
16 issued to Bryan Charles Doonan, M.D.;
- 17 2. Revoking, suspending or denying approval of Bryan Charles Doonan, M.D.'s
18 authority to supervise physician assistants and advanced practice nurses;
- 19 3. Ordering Bryan Charles Doonan, M.D., if placed on probation, to pay the Board the
20 costs of probation monitoring; and
- 21 4. Taking such other and further action as deemed necessary and proper.

22
23 DATED: May 10, 2018

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25 KIMBERLY KIRCHMEYER
26 Executive Director
27 Medical Board of California
28 Department of Consumer Affairs
State of California
Complainant

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